

IN THE UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

United States of America,

No. CR-10-0642 CRB

Plaintiff,

v.

**PROPOSED JURY  
QUESTIONNAIRE**

Christopher Napoli, Joseph Carozza,  
and Daniel Johnson

Defendants.

**JUROR QUESTIONNAIRE**

You have been summoned by this Court for jury selection. The case for which you have been summoned for jury selection is a criminal case entitled United States of America v. Christopher Napoli, Joseph Carozza, and Daniel Johnson. The defendants are each charged by indictment with one count of conspiring to distribute controlled substances outside the scope of professional practice and not for a legitimate medical purpose. The defendants are also charged with one count of possession with the intent to distribute, and distribution of, controlled substances outside the scope of professional practice and not for a legitimate medical purpose. Finally, the defendants are also charged with one count of conspiring to transfer funds into the United States with the intent to promote a specified unlawful activity. The defendants have pled not guilty to all charges alleged in the indictment.

As part of the jury selection process, each of you must complete this juror questionnaire. The questions on this form are asked to assist the Court and the attorneys in the jury selection process for this trial. This questionnaire is designed to obtain information about your background

as it relates to your possible service as a fair and impartial juror in this case. Its use will avoid the necessity of asking each prospective juror every one of these questions in open Court.

Unless the question states otherwise, the fact that a particular question is asked does not imply that the subject matter of the question is an issue in this case. As you read the questions, you are not to draw any inferences about the issues that must be decided in this case. The questions are not meant to invade your privacy but to help select a fair and impartial jury for this case. If there is any reason why you might not be able to give both sides a fair trial in this case, it is important to say so. Please answer each question as fully as you can. Your complete honesty is essential. Do not leave any questions blank. If a question does not apply to you in any way, write "N/A" (for "not applicable"), rather than leaving the form blank. If you do not understand the question, please write that in the space for the answer.

If you feel the answer is too personal, please say so in the space provided. You will have the opportunity to discuss your answer privately. If you do not understand a question, need more space for your response, or wish to make further comments about any question, please use the extra sheets attached at the end of the questionnaire. If you use the explanation sheets, please make sure to indicate which numbered question you are answering. **DO NOT WRITE ON THE BACK ON ANY PAGE.**

You are instructed not to discuss this case or questionnaire with anyone, including your family or fellow jurors. It is important that your answers be yours and yours alone. Your answers are confidential. They will be reviewed by the judge and the lawyers in this case. Following jury selection, the original questionnaire will be kept under seal and will be disclosed, if at all, with names and other identifying information removed.

Please print your name on the cover page and, upon completion, sign your name on the

last page where indicated. If possible print your answers and use ink only. You are expected to sign your questionnaire, and your answers will be given the same effect as a statement given to the Court under oath.

**JUROR QUESTIONNAIRE**

Please fill out this form as completely as possible and print clearly. Since we want to make copies for the attorneys and the Court, do not write on the back of any page. If you need more room, continue at the bottom of the page. Thank you for your cooperation.

1. Your name:
2. Your age:
3. The city where you live:
4. Your place of birth:
5. Your marital status: (circle one)  
single   married   separated   divorced   widowed   live with partner
6. Do you have any medical conditions that do not allow you to sit for several hours at a time? \_\_\_\_\_
7. Do you have any difficulty understanding English?  
\_\_\_\_\_ Yes   \_\_\_\_\_ No
8. Do you have any difficulty seeing which might prevent you from seeing what is occurring in the courtroom, such as observing witnesses or viewing evidence?  
\_\_\_\_\_ Yes   \_\_\_\_\_ No  
If yes, please explain what that condition is:  
\_\_\_\_\_  
\_\_\_\_\_
9. Do you have any difficulty hearing that might prevent you from hearing what is said in the courtroom from the witnesses, lawyers, or judge?  
\_\_\_\_\_ Yes   \_\_\_\_\_ No  
If yes, please explain what that condition is:

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10. What is your occupation, and how long have you worked in it? (If you are retired, or unemployed please describe your main occupation when you were working).

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11. Who is (or was) your employer?

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12. Please list all your employers during the past 10 years and your job duties with each employer:

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13. How long have you worked for your current employer?

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What are your specific duties and responsibilities on the job?

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14. Have you ever been employed in the field of health care, including in a physician's office or pharmacy?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe your employment and when you were so employed.

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15. Are you or any of your close friends or family members associated with or part of the medical profession?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe the association.

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16. Are you or any close friends or family members associated with law enforcement?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please describe the association.

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17. Please describe your educational background:

Highest grade completed:

College and/or vocational schools you have attended:

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Major areas of study:

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18. Please list the occupations of any adults with whom you live.

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19. If you have children, please list their ages and sex and, if they are employed, please give their occupations

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20. Have you belonged to any organizations concerned with criminal law, drug enforcement, the criminal justice system or victim's rights?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please provide the name and a description of the organization.

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21. Have you or anyone close to you been the victim of any kind of crime?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

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22. Do you have any opinions or feelings about the criminal justice system that would affect your ability to be fair and impartial?

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23. Have you or a close friend or family member ever been arrested for or charged with a criminal offense, other than a minor traffic violation? If so, please describe the circumstances (at side bar if requested by the juror).

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24. Have you ever been a party or witness in a lawsuit?

☐ Yes ☐ No

If yes, when was it and what type of case was it? What role did you have in the case?

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25. Have you or any member of your family made a claim against the United States government, or had a dispute or contested matter with any federal agency?

☐ Yes ☐ No

If yes, what was the nature of the claim or dispute? Did you feel that you were treated fairly by the government and the agency involved?

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26. Have you or a close friend or family member ever had any experience with law enforcement that would affect your ability to be fair and impartial in this case?

☐ Yes ☐ No

If yes, what was the experience?

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27. Have you or anyone close to you ever worked for any of the following? (check the blank if the answer is yes)

<input type="checkbox"/> State, City or County office/dept./agency	<input type="checkbox"/> Police department
<input type="checkbox"/> Federal government office/dept./agency	<input type="checkbox"/> Law Firm
<input type="checkbox"/> Other government agency/office	<input type="checkbox"/> State or Federal court
<input type="checkbox"/> Other law enforcement (federal, state or local)	

If you checked any of the above, please describe the person involved, the agency or organization involved and the nature of the employment:

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28. Do you use the Internet?

☐ Yes ☐ No

If so, how frequently do you use the Internet, and what do you generally use it for?

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29. Have you ever obtained prescription medication through the Internet?

☐ Yes ☐ No

If so, please check the description below that best describes your experience and explain briefly in the lines below:

\_\_\_\_\_ Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neither

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30. Have you ever had, or do you have a family member or close friend who has ever had, a negative experience involving a prescription drug?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

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31. Have you or a family member ever had a negative experience involving a physician or pharmacist?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

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32. Do you believe prescription drugs, including controlled substances, should not be used by

physicians to treat patients who are overweight or obese, or who suffer from insomnia or psychological conditions such as depression or anxiety?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

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33. Do you believe that it is appropriate for the federal government to have regulations concerning the distribution by physicians of controlled substances?

\_\_\_\_\_ Yes \_\_\_\_\_ No

34. Have you heard, read, or seen anything, including newspaper or magazine articles and television programs, discussing prescriptions for drugs or controlled substances being issued by physicians over the Internet to patients?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

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35. Have you read, seen or heard anything about this case or any similar case?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain what you have read, seen or heard:

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If you answered yes, did you form any impressions about the case or the similar case based on what you saw, read or heard?

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36. In this case, the defendants are charged with offenses concerning the distribution of prescription drugs (controlled substances). Would the circumstance that the charges in this case relate to drug offenses affect your ability to fairly and impartially judge the evidence in this case?

☐ Yes ☐ No

If yes, please explain:

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37. Is there anything about the fact that this is a drug case or your knowledge of drug use, drug sales or drugs in the news that would make it difficult for you to be fair and impartial in this trial?

☐ Yes ☐ No

If yes, please explain:

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38. Evidence will be presented at trial that was gathered by agents who were acting in an undercover capacity. In that capacity, the agents pretended to be people they are not and said things that were not true. Do you have any concerns about the government's use of undercover agents that would affect your ability to give that evidence the same

consideration you will give the other evidence in this case?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

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39. Do you have any moral, religious or ethical beliefs that would make it difficult for you to sit as a juror in this case?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain:

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40. Is there any matter you would prefer to discuss privately?

\_\_\_\_\_ Yes \_\_\_\_\_ No

41. Do you personally know any of the following people? If you know the person, please circle the name.

[parties to provide appropriate list]

**JUROR'S OATH**

I declare under penalty of perjury that the answers set forth in this Jury Questionnaire are true and correct to the best of my knowledge and belief. I have not discussed my answers with others, or received assistance in completing the questionnaire.

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Signature

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Print Name

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Date